FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

oeg. Mail Processing Section

BOOK & F YAM

Washington, UC 100

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

1388042	
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OMB APPROVAL OMB Number 3235-0076 April 30, 2008 Expires: Estimated average burden hours per response 16.00

SEC	USE ONLY
Prefix	Serial
	<u> </u>
DAT	E RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change Limited Partnership Interest Offering	.)
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506	□ Section 4(6) PROCESSED
Type of Filing: ☐ New Filing ☑ Amendment	1110020
	MAY-2-2 2008
A. BASIC IDENTIFICATION DATA	MAT & Z ZUUO
1.Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON REUTERS
Sustainable Woodlands Fund II, L.P.	omoon keoleko
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
4265 San Felipe, 8th Floor, Houston, Texas 77027	713-993-4675
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business:	
Investment fund	1 (8 8 7)
Type of Business Organization	
· · · _ · · · ·	
☐ corporation ☐ limited partnership, already formed ☐ other (please spec	City
☐ business trust ☐ limited partnership, to be formed	
Month Year	_
Actual or Estimated Date of Incorporation or Organization: 05 2006 Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Requested: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: · Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Promoter Beneficial Owner ☑ Executive Officer ☑ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Sherman, A. Haag **Business or Residence Address** (Number and Street, City, State, Zip Code) 4265 San Felipe, 8th Floor, Houston, Texas 77027 ☑ Director ☐ Beneficial Owner ☑ Executive Officer General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Linbeck, Andrew B. **Business or Residence Address** (Number and Street, City, State, Zip Code) 4265 San Felipe, 8th Floor, Houston, Texas 77027 General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Lyle, Bob **Business or Residence Address** (Number and Street, City, State, Zip Code) 654 North State Street, Jackson, Mississippi 39202 ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter ☑ General and/or Managing Partner Full Name (Last name first, if individual) Sustainable Woodlands Partners, L.L.C. (Number and Street, City, State, Zip Code) **Business or Residence Address** 119 South President Street, 2nd Floor Jackson, Mississippi 39201 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) McCree, Michael T. **Business or Residence Address** (Number and Street, City, State, Zip Code) 119 South President Street, 2nd Floor Jackson, Mississippi 39201 Check Box(es) that Apply: ☐ Promoter Executive Officer ☑ Director ☐ General and/or Beneficial Owner Managing Partner Full Name (Last name first, if individual) Molpus, Dick Business or Residence Address (Number and Street, City, State, Zip Code) 654 North State Street, Jackson, Mississippi 39202 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer ☑ Director General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

(Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

654 North State Street, Jackson, Mississippi 39202

Business or Residence Address

Winstead, Terrell

			В.	INFORMA	ATION ABO	OUT OFFER	RING	<u>.</u>			
1. Has the issue	r sold, or does t	he issuer inte	end to sell, to	non-accre	dited investo	ors in this of	fering?	•••••••		YES	NO ☑
	Answer also i	in Appendix,	Column 2, i	f filing und	er ULOE.						
2. What is the i	ninimum investr	nent that wil	l be accepted	from any i	ndividual?	\$2,0	000,000, sub	ject to waiv	er by the Ge	neral Partne	г
4 5 4 55				*-0						YES	NO
3. Does the off											Ø
or similar i is an assoc broker or c	formation reque emuneration for ated person or a ealer. If more that ation for that bro	solicitation gent of a bro nan five (5) p	of purchasers oker or dealer persons to be	in connect registered	tion with sal with the SE	es of securit C and/or wi	ies in the of th a state or	fering. If a states, list the	person to be se name of the	listed ne	
Full Name (Las Wells Fargo	name first, if in	dividual)									
Business or Res 200 B Street, St				, State, Zip	Code)						
Name of Associ	ated Broker or I	Dealer									
States in Which	Person Listed F	las Solicited	or Intends to	Solicit Pu	rchasers						
(Check "A	1 States" or chec	k individual	States							🗖 All Sta	ates
[AL] [Al- [IL] [IN [MT] [NE [RI] [SC	[[A] [NV]	[AR] [KS] [NH] [TN]	[CA]√ [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Las Wells Fargo	name first, if in	dividual)							· · · · · · · · · · · · · · · · · · ·		
Business or Res 747 N. Burlings				, State, Zip	Code)						
Name of Associ Brian Stock	ated Broker or [Dealer									
	Person Listed F										
(Check "A	I States" or chec	k individual	States	***************************************		•••••••		••••••		🗌 All Sta	ites
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Full Name (Las Frost Bank	name first, if in	dividual)									
Business or Res 100 West Hous	idence Address on Street San A			, State, Zip	Code)					-	
Name of Assoc Julia Warden	ated Broker or I	Dealer		<u> </u>							
States in Which (Check "A	Person Listed F I States" or chec					**********				🗆 All Sta	ites
[AL] {AF [IL] [IN [MT] [NE [RI] [SC	[IA]] [NV]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX] ✓	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	 C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND 	USE OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 300,000,000	\$_129,478,000.00*
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Limited Partnership Interests	\$ 300,000,000	\$ <u>129,478,000.00*</u>
	Other (Specify)	\$	\$
	Total	\$_300,000,000	\$ <u>129,478,000.00*</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	* Subject to the Gene	ral Partner's acceptance.
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	112	\$ 129,478,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	\$	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amount
		Security	Sold
	Rule 505	<u>N/A</u>	\$
	Regulation A	<u>N/A</u>	\$
	Rule 504	N/A	\$
	Total	<u>N/A</u>	\$
isst	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the ter. The information may be given as subject to future contingencies. If the amount of an enditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	Ø	\$None
	Printing and Engraving Costs	\square	\$ None
	Legal Fees	\square	\$ 300,000
	Accounting Fees	\square	\$None
	Engineering Fees	Ø	\$None
	Sales Commissions (specify finders' fees separately)		S None
	Other Expenses (identify)	_ Ø	\$ None
	Total	_ ☑	\$300,000

•	b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$299,700,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
		Payments to Officers, Directors, &	Payments To
	Calculate and Gara	Affiliates	Others
	Salaries and fees	☑ \$ <u>6,000,000* *</u>	
	Purchase of real estate	☑ \$ None	☑ \$ None
	Purchase, rental or leasing and installation of machinery and equipment	☑ \$ None	☑ \$None
	Construction or leasing of plant buildings and facilities	☑ \$ <u>None</u>	✓\$ None
	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	☑ \$ <u>None</u>	☑ \$ <u>None</u>
	Repayment of indebtedness	☑ \$None	☑ \$None
	Working capital	☑ \$ <u>None</u>	☑ \$ <u>293,700,000</u>
	Other (specify)	☑ \$ <u>None</u>	☑ \$None
	Column Totals	☑ \$ 6,000,000	☑ \$ <u>293,700,000</u>
	Total Payments Listed (column totals added)	☑ \$ 29	9,700,000
inves diliga	is anticipated that in the Fund's first year of operations it will pay total annual expenses in the tment management and other expenses, including forestry management fees paid by the Fund, once relating to possible acquisitions, periodic appraisal expenses and other organizational and iliated and non-affiliated persons. D. FEDERAL SIGNATURE	counsel and accountants f	ees and expenses, due
	D. FEDERAL SIGNATURE		
signa	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If the sture constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comation furnished by the issuer to any non-accredited processor pursuant to paragraph (b)(2) of R	mmission, upon written r	
	r (Print or Type) Signature	Date	May 12, 2008
	ninable Woodlands Fund II, L.P		
Nam	e of Signer (Print or Type) Title of Signer (Print or Type)		
ζ. {	Authorized Agent, Sustainable Woodlands Partners, L.L. partner of Sustainable Woodlands Fund II, L.P.	C., general	
	J		

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ☑
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a 239.500) at such times as required by state law.	notice on F	orm D (17 CFI
3	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnish	ed by the is	suer to offerees
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this of establishing that these conditions have been satisfied.		
	issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behal norized person.	If by the un	dersigned dul
Issı	ter (Print or Type) Signature Date (7	A 000	
Sus	tainable Woodlands Fund II, Le	72008	
Nar	ne of Signer (Print or Type) Tit of Signer (Print or Type)		
ì	Authorized Agent, Sustainable Woodlands Partners, L.L.C., general		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPE	NDIX				
1	Intend to non-acci investors	2 3 Type of security and aggregate offering price offered in state (Part C - Item 1)			Type of and amount pu (Part C	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		✓	Limited Partnership Interest - \$300,000,000	I	\$250,000	0	\$0		No
AR									
CA		1	Limited Partnership Interest - \$300,000,000	25	\$13,875,000	0	\$0		No
со		*	Limited Partnership Interest - \$300,000,000	1	\$250,000	0	\$0		No
ст		*	Limited Partnership Interest - \$300,000,000	1	\$500,00	0	\$0		No
DE	<u>-</u>	✓	Limited Partnership Interest - \$300,000,000	1	\$500,000	0	\$0		No
DC									
FL		*	Limited Partnership Interest - \$300,000,000	4	\$11,700,000	0	\$0		No
GA									
ні						<u> </u>			
ID									
IL		4	Limited Partnership Interest - \$300,000,000	2	\$550,000	0	\$0		No
IN		1	Limited Partnership Interest - \$300,000,000	1	\$17,000,000	0	\$0		No
IA									
KS		ļ							
KY									
LA		*	Limited Partnership Interest - \$300,000,000	1	\$6,000,000				
ME									
MD		1	Limited Partnership Interest - \$300,000,000	2	\$2,500,000	0	\$0		No
МА		*	Limited Partnership Interest - \$300,000,000	1	\$5,000,000	0	\$0		No
МІ	,	1	Limited Partnership Interest - \$300,000,000	4	\$1,000,000	0	\$0		No
MN		1	Limited Partnership Interest - \$300,000,000	5	\$1,400,000	0	\$0		No
MS		1	Limited Partnership Interest - \$300,000,000	3	\$20,000,000	0	\$0		No

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				APPE	NDIX			<u> </u>	
1	non-accr investors	Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of and amount pu (Part C	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
МО		1	Limited Partnership Interest - \$300,000,000	1	\$250,000	0	\$0		No
МТ	· · · · · · · · · · · · · · · · · · ·				_				
NE		1	Limited Partnership Interest - \$300,000,000	11	\$2,198,000	0	\$0		No
NV		1	Limited Partnership Interest - \$300,000,000	4	\$1,550,000	0	\$0		No
NH									
NJ		1	Limited Partnership Interest - \$300,000,000	1	\$10,000,000	0	\$0		No
NM		1	Limited Partnership Interest - \$300,000,000	1	\$500,000	0	\$0		No
NY									
NC		1	Limited Partnership Interest - \$300,000,000	2	\$750,000	0	\$0		No
ND									
ОН		1	Limited Partnership Interest - \$300,000,000	17	\$14,800,000				
ок		1	Limited Partnership Interest - \$300,000,000	2	\$550,000	0	\$0		No
OR		1	Limited Partnership Interest - \$300,000,000	1	\$250,000	0	\$0		No
PA									
RI									
sc									
SD									
TN									
TX		1	Limited Partnership Interest - \$300,000,000	18	\$16,355,000	0	\$0		No
UT						- 11-			
VT									
VA			Timber 10						
WA		1	Limited Partnership Interest - \$300,000,000	1	\$750,000	0	\$0		No
wv									
WI		<u> </u>							

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				APPE	NDIX					
1	1 2 Intend to sell to		3 Type of security and				5 Disqualification under State ULOE (if yes,			
	Intend to sell to non-accredited aggregate offering price offered in state (Part C - lem 1) Type of security and aggregate offering price offered in state (Part C - lem 1) Type of security and aggregate offering price offered in state (Part C - lem 1) Type of security and aggregate offering price offered in state (Part C - lem 1)							attach explanation of waiver granted) (Part E- Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
WY		✓	Limited Partnership Interest - \$300,000,000	1	\$1,000,000	0	\$0		No	

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Wells Fa		e urst, ii in	diviđual)									
	s or Residenc Street MAC				, State, Zip	Code)				•		
Name of Curt Lev	Associated l	Broker or D	Pealer			,						
States in	Which Perso	on Listed H	as Solicited	or Intends to	Solicit Pu	rchasers						
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	ne (Last nam		dividual)	<u> </u>								
Business 100 Wes	s or Residence st Houston St	e Address (treet, 4 th flo	(Number and or San Anto	l Street, City nio, Texas 7	, State, Zip 8205	Code)						
Name of John Eac	Associated l	Broker or D	Pealer				<u> </u>	· · · · · · · · · · · · · · · · · · ·				
States in	Which Perso	on Listed H	as Solicited	or Intends to	Solicit Pu	rchasers				•		
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Full Nat Wells F	me (Last nan argo	ne first, if in	dividual)									
	s or Residend Scottsdale F					Code)						
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Busines	s or Residence isa Street, St				y, State, Zip	Code)						
Name o Jeff San	f Associated d	Broker or D	ealer									
States in	Which Pers	on Listed H	as Solicited	or Intends t	o Solicit Pur	chasers						- -
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	me (Last narr	ne first, if inc	dividual)									
Busines	s or Residenc				y, State, Zip	Cođe)						
	f Associated Henderson	Broker or D	ealer									
States in	Which Pers	on Listed H	as Solicited	or Intends t	o Solicit Pur	chasers						
(Cł	neck "All Sta	tes" or chec	k individual	States			•••••				🗀 All Sta	ites
[AL] [IL]	[AK] {IN}	[AZ] [IA]	[AR] [KS]	[CA]	[CO]	[CT]	[DE]✓	[DC]	(FL)	[GA]	[HI]	[ID]
[MT] [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC]√ [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] (PA] (PR)
	me (Last nam			[,,,]		[, ,]	[+ + + 1	[,,,,,]	[,,,,	[,,,]	[,,,]	(i K)
Busines	s or Residence nroe Ctr, Sui				y, State, Zip	Code)						
Name of	f Associated Scholler	· · · · · · · · · · · · · · · · · · ·										<u> </u>
	Which Pers	on Listed H	as Solicited	or Intends to	o Solicit Pur	chasers			· <u>-</u>			
(Cł	neck "All Sta	tes" or checi	k individual	States	***************************************	•••••				***************************************	. 🗆 All Sta	ites
[AL] [IL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
L J	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M[] ✓	[MN]	[MS]	[MO]

Full Nar Wells Fa	ne (Last nan	ne first, if in	dividual)			•						
Busines				d Street, City CA 93101	, State, Zip	Code)						
Name of Jim Bec	f Associated htel	Broker or [Dealer									
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	rchasers						
(Ch	neck "All Sta	ites" or chec	k individua	States			•••••••		•••••		🗖 All St	ates
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Full Nar Wells Fa	ne (Last nan	ne first, if in	dividual)			•						
Business	s or Residen			d Street, City Minneapolis								
Name of Dodd Co	f Associated osgrove	Broker or D	Dealer									
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	rchasers		•				
(Ch	neck "All Sta	tes" or chec	k individual	States	•••••			•••••	***************************************	*****************	🗆 All St	ates
(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] ✓ [VA]	[DC] [MA] [ND] [WA]	(FL] (MI] (OH) (WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar Wells Fa	me (Last nan argo	ne first, if in	dividual)									
Business				J Street, City NE 68154	, State, Zip	Code)						
	Associated raft, CFA	Broker or D)ealer			· · · · · · · · · · · · · · · · · · ·						
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	rchasers						
(Ch	eck "All Sta	tes" or chec	k individual	States			••••••				🗀 All St	ates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] ✓ [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]
Full Nan Wells Fa	ne (Last nan argo	e first, if in	dividual)									
				Street, City 101-078, Sar			Į.					
Name of Doug Ex	Associated ans	Broker or D	Pealer									
States in	Which Pers	on Listed H	as Solicited	or Intends to	Solicit Pu	rchasers				•		
(Ch	eck "All Sta	tes" or chec	k individual	States			***************************************		••••••		🗆 All Sta	ates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] ✓ [KY] [NJ] [TX)	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] {OK] (WII	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] (PR)

Full Na Wells f	ime (Last nan Fargo	ne first, if in	dividual)									
Business or Residence Address (Number and Street, City, State, Zip Code) 6th & Marquette; MAC N9305-101, Minneapolis, MN 55479												
	of Associated s Hawley	Broker or D)ealer									
States i	n Which Pers	on Listed H	as Solicited	or Intends to	Solicit Pu	rchasers						
(C	(Check "All States" or check individual States											
(AL) (IL)	[AK] [IN]	[AZ] [1A]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN] √	(HI) [MS]	(ID) [MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Na Wells I	ime (Last nan	ne first, if in	dividual)									
Busine	ss or Residen Santa Clara #				, State, Zip	Code)						
	of Associated											
	n Which Pers	son Listed H	as Solicited	or Intends to	Solicit Pu	rchasers						
(Check "All States" or check individual States												
[AL] [IL]	[AK] [IN]	[AZ] [1A]	[AR] [KS]	[CA]√ [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	(HI) (MS)	[ID] [MO]
(MT) (RI)	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) (WV)	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Na Wells F	nme (Last nam	ne first, if in	dividual)			,						
Busine	ss or Residen				, State, Zip	Code)						
Name of John M	of Associated	Broker or D	Pealer									
	n Which Pers	on Listed H	as Solicited	or Intends to	Solicit Pu	rchasers						
(C	heck "All Sta	ites" or chec	k individual	States		•••••				•••••	. 🗆 All Sta	ites
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[IL] [MT]	(IN) (NE)	[IA] [NV]	(KS) (NH)	[KY] [NJ]	[LA] [NM	(ME) (NY)	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] ✓ [OK]	[MS] [OR]	[MO] [PA]
	[SC] ame (Last nan	[SD] ne first, if in	[TN] dividual)	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Wells I Busine	Sargo ss or Residen	ce Address (Number and	1 Street, City	, State, Zip	Code)					······	
	I. Fresno St. S of Associated			720		•		· —				
Roger l	Nord											
	n Which Pers											
	(Check "All States" or check individual States											
[AL] [IL] [MT] [RI]	(AK) (IN) (NE) (SC)	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] ✓ [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

Full Nar Wells Fa	ne (Last nan argo	ne first, if in	dividual)									
				1 Street, City co, CA 9410		Code)						
Name of Jerome l	f Associated Paolini	Broker or E	Dealer			,						
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	rchasers						
(Cł	neck "All Sta	ites" or chec	k individual	States					••••••		🗖 All Sta	ates
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	ne (Last nan	ne first, if in	dividual)									
Busines				Street, City	, State, Zip	Code)						
Name of David P	f Associated owell	Broker or D)ealer									·
States in	Which Pers	on Listed H	las Solicited	or Intends to	Solicit Pu	rchasers						
(Check "All States" or check individual States												
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]√	[CO] [LA] [NM [UT]	[CT] {ME] {NY] [VT]	[DE] [MD] [NC] [VA]	[DC] {MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar Wells Fa	ne (Last nan argo	ne first, if in	dividual)									
	s or Residen			Street, City	, State, Zip	Code)				-		
Name of Tom Co	f Associated rbat	Broker or E	Pealer			·			-			
States in	Which Pers	on Listed H	as Solicited	or Intends to	Solicit Pu	chasers			 ,-			
(Ch	neck "All Sta	tes" or chec	k individual	States			•••••				🗖 All Sta	ites
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Full Nar Wells Fa	ne (Last nan argo	ne first, if in	dividual)									
	s or Residene versity Ave.			l Street, City A 94301	, State, Zip	Code)						
Name of Kristine	Associated Paaso	Broker or D	ealer								·	
States in	Which Pers	on Listed H	as Solicited	or Intends to	Solicit Pu	chasers						
(Ch	eck "All Sta	tes" or chec	k individual	States		******************		•••••			🗖 All Sta	ites
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] ✓ [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [Ml] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)

